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An Essay

Refused

on

Amenorrhoea,

by

William M. Wilkins,

of

Virginia.

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Philadelphia October 28th 1824

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On Amenorrhoea or absence of the menses.

This disease is placed by Dr Cullen, under the class, Locales, and order, Epischeses. He has also divided it into three species. 1st Emansio mensium, where the menses do not appear at their usual period. 2nd Suppressio mensium, when after the menses have appeared, but, from some other cause than pregnancy, they have ceased. 3rd Amenorrhoea difficilis, or ~~Menorrhagia difficilis~~ when the flow is in too small a quantity, and attended with pain.

In this dissertation, I shall treat, only of the two first, that is, Retention, and Suppression.

There are three different states, in which the uterus does not take on its specific action, when the patient has arrived at the proper age.

1st When there is no developement, either of the uterus, or the parts which closely sympathize with it, at the period, that it is about to take on the action of secreting

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the menstrual fluid. In this case there should be no interference, unless the general health of the patient was affected. But if the friends of the patient should still urge, that something ought to be done; and it is found that by a noncompliance, they would apply to some person less scrupulous about giving violent medicines, which might prove dangerous. In that case, it may be advisable to temporize, by giving bread pills colored with Rhei-arb, and by that means, give nature an opportunity of fulfilling her office.

2d When the developement is too slow. In this condition, the system is found in two different states. In one, the patient is subject to flushings of the face, is easily fatigued, complains of sickness at the stomach, vertigo, pain in the head, back, limbs &c. When these symptoms are present, the lancet and the other antiphlogistic remedies are to be employed, until the system is reduced to the proper standard. After the febrile action has abated, and the menses should not appear; I would then use the

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Mastic preparations, so as gently to stimulate the nerves, by its close sympathy with the rectum. If these should fail in producing the desired effect, I would resort to some of the more powerfull Emmenagogues, as the savine, senecka volatile Juice of juice. &c.

In the other state of the system, the condition is the reverse of the last. It has been called Chlorosis, by some authors, and Leucophlegmasia, and Cachexia, by others. Some of the following symptoms, almost always, characterize this disease. It begins with an unpleasant odour of the breath, sour eructations, loss of appetite, a feeling of debility, and weariness, disline to active employment, and a desire for indigestible substances, as chalk, pieces of plaster, &c; to these succeed, a pale, sallow, or greenish complexion, a pain of the head, and loins, palpitation of the heart, dyspnoea, hurried respiration from slight causes, syncope, symptoms of hysteria, a sense of suffocation, and lastly, swelling of the abdomen, and oedema of the lower extremeties.

These symptoms have frequently been erroneously, attributed

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to the absence of the menses. Many ignorant, and inexperienced persons, acting on this supposition, have given stimulating and heating medicines, as emmenagogues with the greatest injury to the health of their patients.

Various are the theories, which have been broached to account for the appearance of Chlorosis, about the period, at which the menstrual discharge, usually makes its appearance. Dr Cullen has ascribed it, to a certain state of the ovaria, and to a defective communication of a due stimulus from the genital organs, on which the tone, and tension of the whole system depend. There is no doubt that it sometimes arises from these causes; how could we otherwise account for the fact, that the flow has been produced by the act of coition. Although this may sometimes be the case, yet I think, it is very rarely, owing to these causes; but, almost always to a disordered state of the chylopoetic apparatus, and consequent constipation of the bowels.

As I am indebted to Dr Hamilton, for this view of the subject, I shall take the liberty of copying some of his

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[illegible] all [illegible] [illegible] [illegible]. [illegible] [illegible] [illegible], that she is not pregnant, we generally begin our treatment, by evacuating the uterus by the menstrual canals. [illegible] next our endeavours are to remove the state of debility, and the symptoms of dyspepsia, which accompany it. This is done, by the application of all those remedies, that are found to be useful in that disease, and by bandages after [illegible] [illegible]. Together with these measures, I would pursue strict diet, with the preparation of Iron with those of Iron, or with Rhubarb. I would use at the same time, if the [illegible], [illegible] [illegible] the treatment of Chlorosis. If these should fail, I would resort to some of those medicines, that are thought to act more directly on the uterus. It has been disputed, whether any medicines do act specifically on that organ. This is a point I shall not attempt to determine, for even if it could be in question, it would be of no practical utility. It is important for me to know, that they act on it in some

than whom, there can be no higher authority.
He also recommends the Juniperus sabina or savine, very highly. In the case in which the Madder failed I succeeded completely, with the oil of savine continued for some time.
A favourite remedy of Dr Dewees is, the Volatile Tinct of Gum Guiacum. When he has administered it, he says, he has never found it to fail. I have not used it myself, but from the high authority by which it is recommended, I have no doubt of its efficacy, when properly administered.
Dr Physick speaks very highly of the Helleborus Niger. A great many other medicines have had their advocates as emmenagogues, and no doubt they have sometimes proved successfull, when properly used. For, as in other classes of medicines, there has been a fashion in the choice of emmenagogues, and first one is at the head, then another, according as, they happen to be applied with judgement.

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In this disease the state of the system is to be attended to, as much as in any other whatever, and in proportion, as we prescribe these remedies with due consideration to this circumstance, so will be our success. If practitioners would act on this principle, I think we should hear much less complaint of their uncertainty for the future.

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